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							(Signorum)	
			l	***************************************	***************************************	***************************************	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
10/581,164 TITLE OF INVENTION	05/31/2006 OPIOID RECEPTOR :	ANTAGONISTS	Oana Rae Benesh			X16095	1775	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DI	E POEV DAT	D ISSUE FEE	TOTAL PEE(S) DUE	OA PE NUM	
nonprovisional	NO	\$1400	\$300	<u>i</u>	50	\$1700	05/08/2007	
·	EXAMINER		CLASS-SUBCLASS	7	30	31700	03/08/2007	
ROBINSON, BINTA M		ART UNIT	\$14-318000	J				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  1. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up or agents OR, altern (2) the name of a sin registered attorney ( 2 registered patent a	reprinting on the patent front page, list the names of up to 3 registered patent attorneys emis OR, alternatively, the name of a single firm (having as a member a tened attorneys or agent) and the names of up to istered patent attorneys or agents. If no name is 1, no name will be printed.				
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Please check the appropri	iate assignee category or	categories (will not be pr	inted on the patent):	Individual	Corporati	on or other private grou	spentity Government	
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an appication. Confident submitting the completed this form and/or suggestin Box 1450, Alexandria, Vi Alexandria, Virginia 2231	application form to the ms for reducing this bungging 22313-1450. DO 3-1450.	U.S.C. 122 and 37 CFR I USPTO. Time will vary len, should be sent to the NOT SEND FEES OR C	a is required to obtain of .14. This collection is a depending upon the ind Chief information Offi OMPLETED FORMS  pond to a collection of in	stimated to tak ividual case. A cer. U.S. Paten FO THIS ADD	e 12 minutes ny comments t and Trademi RESS, SEND	to complete, including on the amount of time ark Office. U.S. Depart TO: Commissioner for	by the USFIO to process) gathering, preparing, and you require to complete ment of Commerce, P.O. r Patents, P.O. Box 1450,	